

## **APPLICATION DATA SHEET**

### **Application Information**

Application Number:: New  
Filing Date:: 04/22/04  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification:: None  
Suggested Group Art Unit:: None  
CD-ROM or CD-R?:: None  
Sequence Submission:: None  
Computer Readable Form (CRF)?:: No  
Title:: BOOKMARKS USED FOR MAP NAVIGATION  
Attorney Docket Number:: ALC 3131  
Request for Early Publication?:: No  
Suggested Drawing Figure:: 1  
Total Drawing Sheets:: 2  
Small Entity?:: No  
Petition Included?:: No  
Licensed US Govt. Agency:: None

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canada  
Status:: Full Capacity  
Given Name:: David  
Middle Name::  
Family Name:: Kieseckamp  
Name Suffix::  
City of Residence:: Ottawa  
State or Province of Residence:: ON  
Country of Residence:: Canada  
Street Mailing Address:: 565 Cole Avenue

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City of Mailing Address:: Ottawa  
State or Province of Mailing Address:: Ontario  
Country of Mailing Address:: Canada  
Postal or Zip Code of Mailing Address:: K2A 2B4  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canada  
Status:: Full Capacity  
Given Name:: Terrence  
Middle Name::  
Family Name:: Martineau  
Name Suffix::  
City of Residence:: Ottawa  
State or Province of Residence:: ON  
Country of Residence:: Canada  
Street Mailing Address:: 204-20 Robinson Avenue  
City of Mailing Address:: Ottawa  
State or Province of Mailing Address:: Ontario  
Country of Mailing Address:: Canada  
Postal or Zip Code of Mailing Address:: K1N 8N9  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canada  
Status:: Full Capacity  
Given Name:: Raymond  
Middle Name::  
Family Name:: Canton  
Name Suffix::  
City of Residence:: Ottawa  
State or Province of Residence:: ON

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Country of Residence:: Canada  
Street Mailing Address:: 302-18 Charlevoix Street  
City of Mailing Address:: Ottawa  
State or Province of Mailing Address:: Ontario  
Country of Mailing Address:: Canada  
Postal or Zip Code of Mailing Address:: K1L 8L9  
Applicant Authority Type:: Inventor  
Primary Citizenship Country:: Canada  
Status:: Full Capacity  
Given Name:: Keith  
Middle Name::  
Family Name:: Morin  
Name Suffix::  
City of Residence:: Kanata  
State or Province of Residence:: ON  
Country of Residence:: Canada  
Street Mailing Address:: 8 Ayton Lane  
City of Mailing Address:: Kanata  
State or Province of Mailing Address:: Ontario  
Country of Mailing Address:: Canada  
Postal or Zip Code of Mailing Address:: K2K 2H4

**Correspondence Information**

Correspondence Customer Number:: 30868  
Name:: Terry W. Kramer  
Street of Mailing Address:: Kramer & Amado, P.C.  
2001 Jefferson Davis Highway  
Suite 1101  
City of Mailing Address:: Arlington

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State or Province of Mailing Address:: VA  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 22202  
Phone Number:: 703-413-5000  
Fax Number:: 703-413-5048  
E-mail address:: terry@kramerip.com

#### Representative Information

Representative Customer Number::	30868
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#### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

#### Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

#### Assignee Information

Assignee Name:: ALCATEL  
Street of Mailing Address:: 54 Rue La Boétie  
City of Mailing Address:: Paris  
Country of Mailing Address:: France  
Postal or Zip Code of Mailing Address:: 75008